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APPLICATION SERIAL NUMBER	// CROSS REFERENCE(S)		1.
	SUBCLASS (ONE SUBCLASS PER BLOCK)	R BLOCK)	74
APPLICANT'S NAME (PLEASE PRINT)	100 1 517	530	
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IF REISSUE, ORIGINAL PATENT NUMBER	4		
INTERNATIONAL CLASSIFICATION			
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GROUP	ASSISTANT EXAMINER (PLEASE STAMP OR PRINT FULL NAME)	PRINT FULL NAME)	
100	PRIMARY EXAMINER (PLEASE STAMP OR PRINT FULL: NAME)	IT FULL: NAME)	

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